



Introduction - 5 minutes



Social Needs Story - 10 minutes



Social Needs

Spotlight on

Real-World Experience - 15 minutes

Discussion – 15 minutes



# Idaho Health Data Exchange

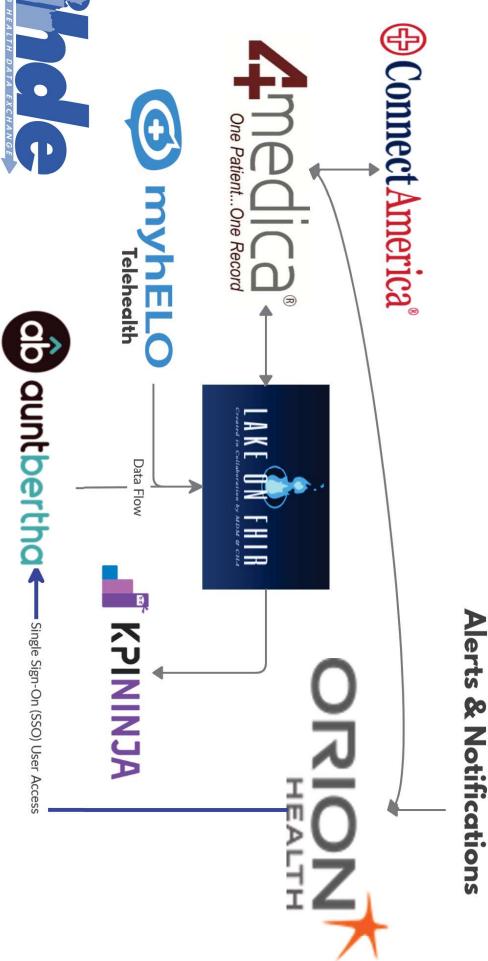
Our Mission: Lead collaboration in the healthcare community to improve patient care.

Our Vision: Be the trusted partner for health information services across our region.

appropriate providers and have access to an advanced data analytics system. telemedicine visits, remotely monitor patients, assess social needs and refer patients to securely look up and retrieve patient medical record information, receive alerts, engage in Idaho Health Data Exchange (IHDE) provides participating entities and providers with the ability to

IHDE is expanding its user base and data access to include Behavioral Health, Addiction Treatment Centers, Skilled Nursing Facilities, Emergency Medical Services, Social Programs, and Insurance

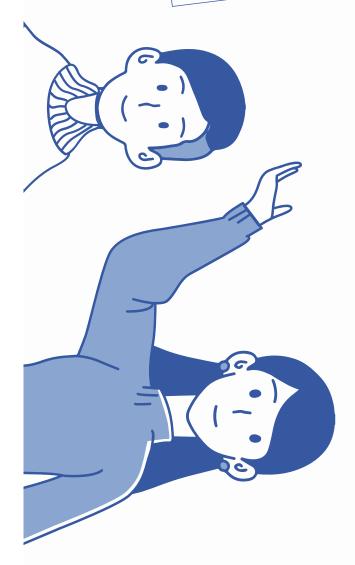
### **Shared Technology Services Alerts & Notifications**







## Janelle's Stor



representation of

A visual

experience with a patient's

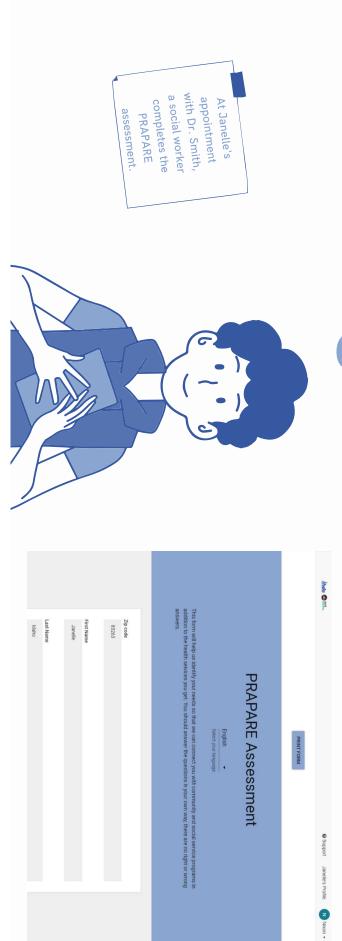
Aunt Bertha



### Meet Janelle...

Pocatello. Both doctors and their clinics are connected to the Idaho Health Data Exchange. She has diabetes and lives in Preston. Janelle's condition requires careful monitoring and coordination between her primary care physician, Dr. Smith, in Preston and her endocrinologist, Dr. Jones, in

## \_et's get startec





#### Some of Janelle's social needs include:

healthcare. Access to quality

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transportation. Access to reliable

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Access to safe housing.

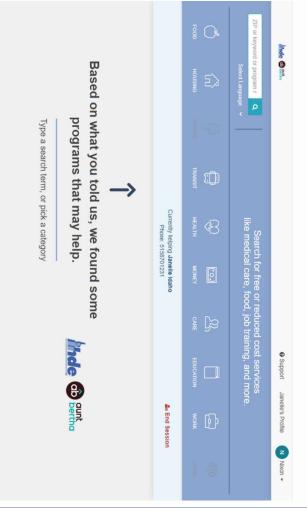
N foods. Access to nutritious

4 support. Access to social

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and health literacy. Access to education







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Choose the specific

Choose the specific categories of need based on the PRAPARE Assessment.

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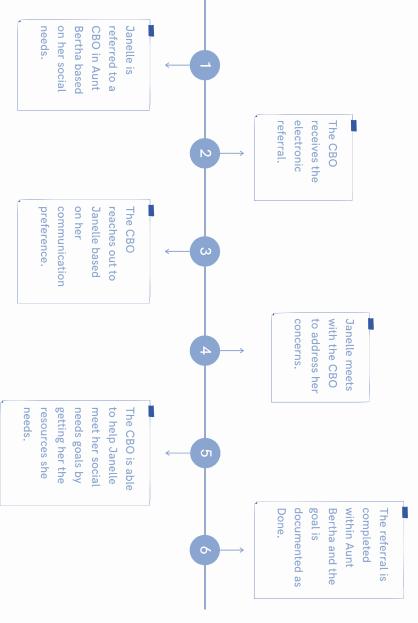
Review available programs and resources applicable for Janelle's current situation.

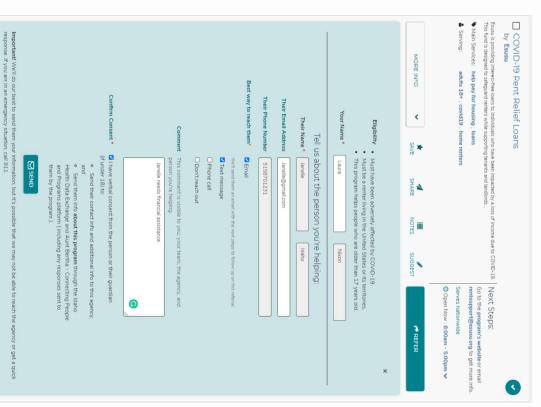
Create referrals to community-based organizations (CBO) to support Janelle's wholeperson health.



### Closed-Loop Referral

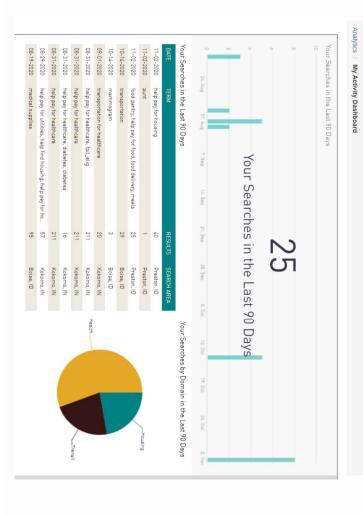
Helping Janelle meet her social needs goals.



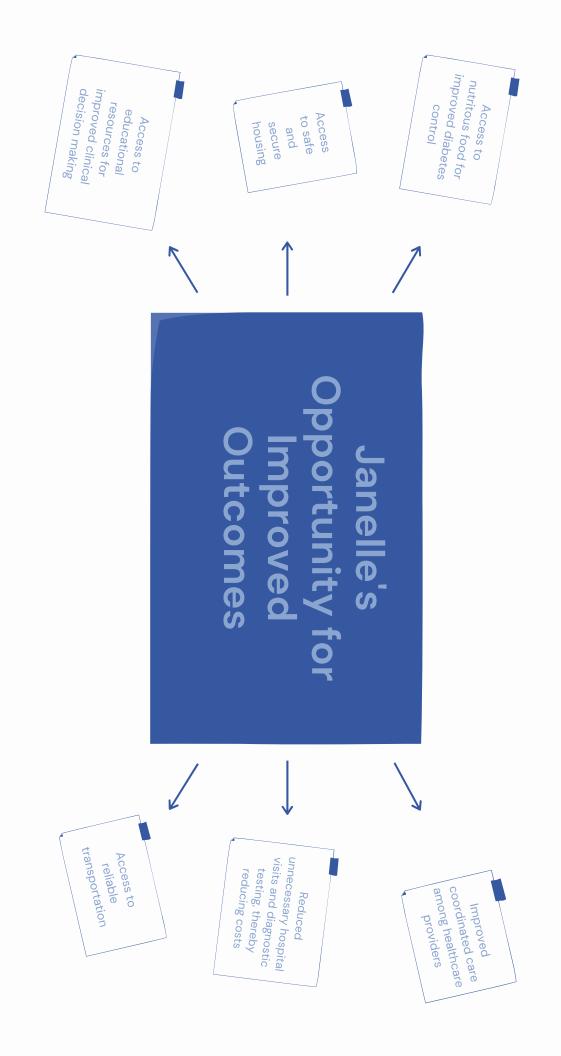


### Tracking Janelle's Referrals

With HIPAA-compliant and secure hosting through IHDE's clinical portal, Janelle's care team can access and share program referrals between staff members and community-based organizations.



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Housing Status: In progress	Medical Status: In progress	Utilities Status: In progress	Education Status: In progress	Mental Health Status: In progress	Transportation Status: On hold	Family/Community Support Status: In progress	Food Status: Done	G
11/02/20 ~	11/02/20	11/02/20	11/02/20	11/02/20	11/02/20	11/02/20	11/02/20 ~	ADD GOAL
<	<	<	<	<	<	<	<	



## Kootenai Care Network

#### Jill Weeks, RN, MPH, MHCDS, PCMH-CCE **Executive Director, Transitional Care Services**

#### A Clinically Integrated Network

they develop and implement clinical protocols and monitor clinical performance. This helps achieve high quality care in a more efficient manner than can be achieved independently. independence, but work together in a mutually-accountable way. Through data analytics and collaboration, to improve clinical outcomes and provide more cost-effective care. Network members maintain their Through clinical integration, providers, hospitals and payers can work together in a more coordinated way

network is able to engage in value-based contracting with both payers and employers. As quality metrics among network members improve and measurably better patient care is established, the

#### IN THE HEALTHCARE COMMUNITY IHDE: LEADING COLLABORATION TO IMPROVE PATIENT CARE.

Thank you.

